## **OPERATING EXPENDITURES**

COLIEDINE D. (EEC Farms 2)		F	OR LINE NUMBER: PAGE OF	
SCHEDULE B (FEC Form 3)	Use separate schedule(s) for each category of the Detailed Summary Page	nedule(s) (c	check only one)	
ITEMIZED DISBURSEMENTS			X 17 18 19a 19b 20a 20b 20c 21	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)				
Des Con Committee				
Doe for Congress Committee  Full Name (Last, First, Middle Initial)				
Δ			Date of Disbursement	
Quick Printing Inc.		Mam / Dab / Yayayay		
Mailing Address 567 4th Street			01 28 2004	
City State	Zip Code		Amount of Each Disbursement this Period	
Fair Lakes VA	00000		300.00	
Purpose of Disbursement Printing Brochures		006	300.00	
Candidate Name		Category/		
Office Sought: House Disbursement Fo			Refund or Disposal of Excess Contributions Required Under	
Office Sought: House Disbursement Fo Senate Primary			11 C.F.R. 400.53	
	specify) ▼			
State: District:				